Lumpkin County Environmental Health

Pre-purchase or Existing Septic System Evaluation Application

Owner's Name:		Г	Date:			
	Last	First				
Owner's Current Mailing Address	(number)	(street)			(apt/suite)	
	(city)			(state)	(zipcode)	
Phone:			Email			
PROPERTY A	DDRESS:					
	(house #)	(street)		(city)		(zipcode)
If in a subdiv	vision: Subdivision name	e:		I	ot number:	
Is this a pre-	purchase site evaluation	? Yes No Or is	s it an existing septic sy	stem evaluation? Yes	_ No	
Reason for E	valuation Request:					
Lot size (acre	es): Numbe	er of bedrooms existing or	planned: Do	we need to meet at the s	ite? Yes No	
Previous ow	ners' names or builder's	name:				
Will/Do you	have a garbage disposal	? Yes No W	'ill/Do you have a priva	te well? Yes I	No	
Existing Eval	: How old is the existing	septic system?	Do you/we ha	ave a record of it?		
When was yo	our septic tank last pum	ped?				
Directions to from our of						
	<u>*</u>	* You must include	payment with thi	s application. **		
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